

POSITION

INITIALS

ID NO.

DATE

**FEE DETERMINATION**  
**O.I.P.E. CLASSIFIER**  
**FORMALITY REVIEW**  
**RESPONSE FORMALITY REVIEW**

**INDEX OF CLAIMS**

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
—	(Through numeral) Canceled	A	Appeal
—	Restricted	O	Objected

Claim	Final	Original	Date
1	1	1	6/22/22
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If more than 150 claims or 10 actions  
staple additional sheet here

**BEST AVAILABLE COPY**

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